MIKE DEWINE

Ohio Peace Officer Training Commission
Office 800-346-7682
Fax 740-845-2675

P.O. Box 309
London, OH 43140
www.OhioAttorneyGeneral.gov

RECEIVED
By Judith Wilson at 11:44 am, Sep 30, 2015

NOTICE OF PEACE OFFICER APPOINTMENT

1. Within ten days of the appointment or status change, submit one copy of this form either by email, fax or mail.
2. Type or print legibly and complete all blanks. Enter N/A if not applicable.
3. Submit pages 1 and 2 when an officer is newly-appointed to your agency, or has previously left the agency and returns.
4. Submit only page 1 when an officer continues to be appointed by your agency, but has a change from one status, as listed in Box 15, to a different status.
5. Enter any necessary information for a Correction to Record, submitting all affected pages, and attach a letter explaining the requested change.

OFFICER INFORMATION	1. Name (Last)	(First)	(Middle)	2. Social Security Number
	Mansfield,	Daniel	J	[redacted]
3. Previous Name(s) or Alias (Last)		(First)		(Middle)
4. Birth date (mm/dd/yyyy)	5. Email Address			6. Phone Number
04-28-1983	[redacted]			[redacted]
7. Home Mailing Address (#/Street/PO Box)		(City)	(State)	(Zip Code) (County Name)
[redacted]				
8. (Only complete if this is the officer's first appointment or OSP)	(Academy) Name	(Academy Number)	(Dates of Training)	
	University of Akron Police Academy	Bas-04048	Aug 2004	

AGENCY INFORMATION	9. Agency Name		
	Amsterdam Village Police		
10. Agency Email Address		11. Agency Phone Number	
AmsterdamPD24@Yahoo.Com		740-543-3797	
12. Agency Mailing Address (#/Street/PO Box)	(City)	(Zip Code)	(County Name)
103 Springfield St. PO Box 115	Amsterdam	Oh	43903

APPOINTMENT INFORMATION (Complete Date, Status and ORC)	13. New Appointment Date	14. Status Change Date
	9 / 7 / 2015	/ /

15. Select New Status: ____ Full-Time ____ Part-Time ____ Auxiliary ____ Reserve ✓ Special ____ Seasonal

16. Select New ORC

____ City Full-Time/Part-Time (737.02)	____ City Auxiliary/Reserve/Special (737.051)	____ City Chief (737.02)
✓ Village Full-Time/Part-Time/Special (737.16)	____ Village Auxiliary/Reserve (737.161)	____ Village Chief (737.15)
____ Township Police Officer (505.49)	____ Township Constable (509.01)	____ Other Chief - List ORC/Charter ____
____ Other - List ORC/Charter ____	____ Deputy Sheriff (311.04)	____ Sheriff (311.01)

ATTESTATION OF REPORTING AUTHORITY	I have carefully read this document and fully understand its contents and I sign it of my own free will and volition. I attest that the information provided on this document is true and correct and is based on my personal knowledge or inquiry. I further understand and acknowledge that submission of falsified records is a criminal violation.	
17. Signature of Reporting Authority	18. Printed Name and Title	19. Date
Gary Pepperling	Gary Pepperling, Mayor	09 / 07 / 2015
20. Signature of Witness	21. Printed Name (First, Middle, Last)	22. Date
Drew Dodds	Drew Dodds	09 / 07 / 2015

This form may be emailed to: SF400@ohioattorneygeneral.gov

Officer Name (Last)	(First)	(Middle)	Social Security Number
Mansfield	Daniel	J	[redacted]

23. OATH OF OFFICE

I do solemnly swear or affirm that I will support the Constitution and Laws of the United States of America, the Constitution and Laws of the State of Ohio, and Laws and Ordinances of the political subdivision to which I am appointed and to the best of my ability will discharge the duties of this office.

Signature of Appointee

Signature of Appointing Authority

Gary Pepperling
Name of Appointing Authority (Typed or Printed Legibly)

Mayor, Village of Amsterdam
Title of Appointing Authority (Typed or Printed Legibly)

OHIO PEACE OFFICER APPOINTMENT HISTORY

Please list all prior appointments. Use additional copies of page 2, as needed, to list the entire appointment history.

30. Appointed By (Agency Name and County):	31. From(mm/dd/yyyy):	To(mm/dd/yyyy):
Village of Brady Lake	04 / 04/ 2005	/ /
32. Appointment Status (Check Appropriate Box) _____ Full-Time __X__ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

27. Appointed By (Agency Name and County):	28. From(mm/dd/yyyy):	To(mm/dd/yyyy):
	/ /	/ /
29. Appointment Status (Check Appropriate Box) _____ Full-Time _____ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

30. Appointed By (Agency Name and County):	31. From(mm/dd/yyyy):	To(mm/dd/yyyy):
	/ /	/ /
32. Appointment Status (Check Appropriate Box) _____ Full-Time _____ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

33. Appointed By (Agency Name and County):	34. From(mm/dd/yyyy):	To(mm/dd/yyyy):
	/ /	/ /
35. Appointment Status (Check Appropriate Box) _____ Full-Time _____ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

36. Appointed By (Agency Name and County):	37. From(mm/dd/yyyy):	To(mm/dd/yyyy):
	/ /	/ /
38. Appointment Status (Check Appropriate Box) _____ Full-Time _____ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

39. Appointed By (Agency Name and County):	40. From(mm/dd/yyyy):	To(mm/dd/yyyy):
	/ /	/ /
41. Appointment Status (Check Appropriate Box) _____ Full-Time _____ Part-Time _____ Auxiliary _____ Reserve _____ Special _____ Seasonal		

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